

**INSTRUCTIONS FOR COMPLETING  
SPACE TEST PROGRAM FLIGHT REQUEST - EXECUTIVE SUMMARY  
(DD FORM 1721-1)**

**General Information.** The Space Test Program Flight Request - Executive Summary requests information required by management for "quick look" understanding and evaluation for a proposed flight experiment. The Executive Summary will describe the objective(s) of the experiment and military value or relevance. It will also provide a summary of flight specifications and requirements, funding and hardware status.

**Security Classification.** The form will be marked with a security classification commensurate with the highest classification of any single entry on the page. For a classified form, the security classification of each block must be indicated such as (S) for SECRET. The downgrading block (Classified by:/Declassify On:) must also be completed.

**Instructions for Completing Specific Items:**

**Item 1. *Experiment Title.*** Select a title that describes the broad objectives of the experiment and uses one or more key words. Nicknames, acronyms, etc., should not be used. The title should be unclassified.

**Item 2. *Short Title/Acronym.*** Use nicknames and acronyms. The short title/acronym should be unclassified.

**Item 3. *Experiment Number.*** The acronym of the sponsoring organization followed by four digits consisting of the last two digits of the year and the sponsor's sequential log number in two digits. For example: the first experiment submitted by the Naval Research Laboratory in 2000 would be NRL-0001. Once assigned, this number does not change. Coordination with Service/Agency SERB administrator is necessary.

**Item 4. *Date.*** Self-explanatory.

**Item 5. *Objective.*** Describe what is to be accomplished. State the purpose/use of the expected results of the experiment. If there is more than one objective, treat each one separately. If the objective is classified, an unclassified version must be included, if possible.

**Item 6. *Description.*** Identify and discuss the equipment and the technical approach or technique to be used. State how the experiment objectives are to be obtained. Include descriptive website address if applicable.

**Item 7. *Relevance to Specific DoD Requirements.*** Explain why this experiment should be performed. Emphasize relevance to DoD as much as possible. Indicate potential improvement in military hardware or military operations. Reference current documented military requirements (i.e. document name/number, page number, paragraph title/number). Be prepared to present unclassified documents at SERB.

**Item 8. Requirements Summary.**

- a. Requested STP services.** Check all that apply.
- b. Number of Flights Requested/Required to Meet Objectives.** Indicate the total number of flights that will be requested of STP.
- c. Flight Duration Required.** Indicate flight duration required to meet the stated objectives.
- d. Flight Mode.** Indicate by the notation scheme shown preferred and acceptable flight modes.
- e. Power.** Indicate stand-by, nominal and maximum power in watts.
- f. Dimensions.** Indicate the dimensions of the experiment in centimeters.
- g. Mass.** Indicate the mass of the experiment in kilograms.
- h. Volume.** Indicate the volume of the experiment in cubic centimeters.
- i. Hardware Flight Ready Date.** Indicate the date on which the experiment could be delivered for integration with the spacecraft or support equipment.
- j. Stabilization Type.** Indicate the type of stabilization required, if applicable.
- k. Orbit Requirements.** Indicate the apogee and perigee in kilometers, including tolerances, required to meet the stated objectives.
- l. Inclination.** Indicate the inclination in degrees, including tolerances, required to meet the stated objectives.
- m. Other Requirements.** Indicate any additional requirements necessary to meet the stated objectives.

**Item 9. Program Summary.**

- a. Funding Breakdown.** Indicate funds previously obtained or expended to date, funds planned for the current fiscal year, and funds needed for future fiscal years. Distinguish between funds that are needed and those that have been secured. Total cost includes all costs supported by the experiment sponsor and all other agencies, businesses, etc., supporting this effort. Do not include the cost of STP requested services.
- b. Design/Fabrication Status.** Indicate the current status of the experiment.
- c. Contractor.** Indicate the experiment contractor, if applicable.

**Item 10. DoD Departmental Approval.**

- a-g. Approving Official.** The individual with authority to forward spaceflight requests to the Directorate of Space & Nuclear Deterrence, Office of the Assistant Secretary of the Air Force for Acquisition (SAF/AQS). See AFI 10-1202(I), paragraph 1.3.
- h-n. Principal Investigator.** The individual responsible for the experiment. This individual will be the primary point of contact for the experiment.